

QUERY CONTROL FORM		RTIS USE ONLY	
Application No. <u>10/074,369</u>	Prepared by <u>PAP</u>	Tracking Number <u>05 959 892</u>	
Examiner-GAU <u>Bell-1746</u>	Date <u>7/6/04</u>	Week Date <u>5/31/04</u>	
	No. of queries <u>1</u>	<u>IFW</u>	

SPECIFICATION	
a. Page Missing	
b. Text Continuity	
c. Holes through Data	
d. Other Missing Text	
e. Illegible Text	
f. Duplicate Text	
g. Brief Description	
h. Sequence Listing	
i. Appendix	
j. Amendments	
k. Other	
CLAIMS	
a. Claim(s) Missing	
b. Improper Dependency	
c. Duplicate Numbers	
d. Incorrect Numbering	
e. Index Disagrees	
f. Punctuation	
g. Amendments	
h. Bracketing	
i. Missing Text	
j. Duplicate Text	
k. Other	

MESSAGE Pto-1449: Please either initial or line through citation(s). Copy provided for reference.

Thank you

initials PAP

RESPONSE - The IDS has been considered + initials/ed + A copy has been faxed to the applicant

initials MZJ